24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	PAGE 1 OF 2 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Priorities USA Action	C C00495861
Check if 24-hour report X 48-hour report Ne	ew report Amends report filed on Amends report
Full Name of Payee Shorr Johnson Magnus	Date of Public Distribution/Dissemination
	06 / D 14 / 2016
Mailing Address 100 N 20th St	Amount
Ste 201 City State	Zip Code 43097.89
Philadelphia PA	19103-1454 Transaction ID : VNTYH9T15A1 Date of Disbursement or Obligation
Purpose of Expenditure Video Production (Estimate)	Category/ Type 06 / 14 / 2016
Name of Federal Candidate	Support Office Sought: House District: 00
DONALD J TRUMP	Oppose President Senate State:00
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: ☐ Primary ☐ General 2016 ☐ Other (specify) ▶
Full Name of Payee	Date of Public Distribution/Dissemination
Targeted Platform Media LLC	06 14 2016
Mailing Address 1291 Hollywood Ave	Amount
City State	Zip Code 3438991.00
Annapolis MD	21403-4909 Transaction ID : VNTYH9T0V42 Date of Disbursement or Obligation
Purpose of Expenditure TV Ad Buy (Estimate)	Category/ Type 06 / 14 / 2016
Name of Federal Candidate	Support Office Sought: House District: 00
DONALD J TRUMP	Oppose President Senate State: 00
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: ☐ Primary ☐ General 2016 ☐ Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	3482088.89
(b) SUBTOTAL of Unitemized Independent Expenditures	
()	
(c) TOTAL Independent Expenditures	• <u> </u>
	ditures reported herein were not made in cooperation, consultation, or concert norized committee or agent of either, or (if the reporting entity is not a political
Greg Speed	M = M / D = D / Y = Y = Y
Signature	lectronically Filed] Date 06 16 2016

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	FOR SE OF FORM 24/48	
JAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼	
Priorities USA Action	C C00495861	
Check if 24-hour report X 48-hour report New report Amends report filed	on Mam / Dab / Yayayay	
Full Name of Payee Targeted Platform Media LLC	Date of Public Distribution/Dissemination	
	06 14 2016	
Mailing Address 1291 Hollywood Ave	Amount	
City State Zip Code	382500.00	
Annapolis MD 21403-4909	Transaction ID: VNTYH9T0XS1 Date of Disbursement or Obligation	
Purpose of Expenditure TV Ad Buy (Estimate) Category/ Type	06 14 2016	
Name of Federal Candidate Support Office	e Sought: House District: 00	
DONALD J TRUMP Oppose	President Senate State: 00	
Calendar Year-To-Date Per Election for Office Sought Disbut 2016	ursement For: Primary	
Full Name of Payee	Date of Public Distribution/Dissemination	
	M = M / D = D / Y = Y = Y	
Mailing Address	Amount	
City State Zip Code		
Side Zip Sode		
Purpose of Expenditure Category/	Date of Disbursement or Obligation	
Type		
Name of Federal Candidate Support Office	e Sought: House District:	
Oppose	President Senate State:	
Caloffact four to Bate	ursement For: Primary General	
Per Election for Office Sought	Other (specify)	
(a) SUBTOTAL of Itemized Independent Expenditures	382500.00	
(b) SUBTOTAL of Unitemized Independent Expenditures		
(c) TOTAL Independent Expenditures	3864588.89	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.		
	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Signature		